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| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><br>(Only for new nonprovisional applications under 37 CFR 1.53(b)) | Attorney Docket No. 29926/39500 |   |
|  | First Inventor                  | Won-Ho Lee  |
|  | Title                           | METHOD FOR FABRICATING IMAGE SENSOR INCLUDING ISOLATION LAYER HAVING TRENCH STRUCTURE |
|  | Express Mail Label No.          | EV 323777241 US   |

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| <b>APPLICATION ELEMENTS</b><br>See MPEP chapter 600 concerning utility patent application contents. | <b>ADDRESS TO:</b><br>MS Patent Application<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450 |
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|--|--|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br>(Submit an original, and a duplicate for fee processing)<br>2. <input type="checkbox"/> Applicant claims small entity status.<br>See 37 CFR 1.27.<br>3. <input checked="" type="checkbox"/> Specification [Total Pages 19]<br>(preferred arrangement set forth below)<br>- Descriptive title of the invention<br>- Cross Reference to Related Applications<br>- Statement Regarding Fed sponsored R & D<br>- Reference to sequence listing, a table, or a computer program listing appendix<br>- Background of the Invention<br>- Brief Summary of the Invention<br>- Brief Description of the Drawings (if filed)<br>- Detailed Description<br>- Claim(s)<br>- Abstract of the Disclosure<br>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 5]<br>5. Oath or Declaration [Total Sheets ]<br>a. <input type="checkbox"/> Newly executed (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br>(for continuation/divisional with Box 18 completed)<br>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).<br>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)<br>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)<br>a. <input type="checkbox"/> Computer Readable Form (CRF)<br>b. Specification Sequence Listing on:<br>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper<br>c. <input type="checkbox"/> Statements verifying identity of above copies<br><b>ACCOMPANYING APPLICATIONS PARTS</b><br>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))<br>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney<br>11. <input type="checkbox"/> English Translation Document (if applicable)<br>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations<br>13. <input checked="" type="checkbox"/> Preliminary Amendment<br>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)<br>15. <input checked="" type="checkbox"/> Certified Copy of Priority Document No. 10-2002-0085164 (if foreign priority is claimed)<br>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.<br>17. <input type="checkbox"/> Other: |
|--|--|

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.:

Prior application information: Examiner

Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

|   |  |           |                |   |                |
|---|--|-----------|----------------|---|----------------|
| 19. CORRESPONDENCE ADDRESS  |  |           |                |   |                |
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label |  | 04743     |                | or <input checked="" type="checkbox"/> Correspondence address below |                |
| Name  | MARSHALL, GERSTEIN & BORUN<br>Michael R. Hull  |           |                |   |                |
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|                   |                        |                                   |               |
|-------------------|------------------------|-----------------------------------|---------------|
| Name (Print/Type) | Mark H. Hopkins, Ph.D. | Registration No. (Attorney/Agent) | 44,775        |
| Signature         |                        | Date                              | July 10, 2003 |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 323777241 US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: July 10, 2003

Signature: (Richard Zimmermann)

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|---|--|--------------------------|--|
| <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2003</h3> <p style="font-size: small; margin: 5px 0;">Effective 01/01/2003, Patent fees are subject to annual revision.</p> |  | <b>Complete if Known</b> |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |  | Application Number       |  |
|   |  | Filing Date              |  |
|   |  | First Named Inventor     |  |
|   |  | Examiner Name            |  |
|   |  | Art Unit                 |  |
| TOTAL AMOUNT OF PAYMENT (\$)  |  | 750.00                   |  |
|   |  | Attorney Docket No.      |  |
|   |  | 29926/39500              |  |

| <b>METHOD OF PAYMENT</b> (check all that apply)   |          |              |          | <b>FEE CALCULATION</b> (continued)  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
|---|----------|--------------|----------|---|----------------|--------------|------|---|----------------|--------------|----------|--------------------|----------|----------|----------|----------|----------|--------------------|--------|--------------------|-----|-------------------------------------|-----|-------------------|----|------|-----|---|-----|------------------|-----|-----------------|----------|---------------------------|----------|--------------------|----------|------|-------|--|----|------------------------|------|---------------------|------|--|----|-----------------------------------|--------|------|--------|---|-----|---------------------------------------|-----|------|----|--|----|--|-----|------|-----|---|---|--|-----|---------------------|-----|--|--|------|-------|------|-----|---|--|------|-------|------|-----|--|--|------|-----|------|-----|------------------|--|------|-----|------|-----|--|--|------|-----|------|-----|--------------------------|--|------|-------|------|-------|---|--|------|-----|------|----|----------------------------------|--|------|-------|------|-----|------------------------------------|--|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|-------------------------------------|--|------|-----|------|-----|---|--|------|----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|
| <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None  |          |              |          | <b>3. ADDITIONAL FEES</b><br><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>1,970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1,300</td><td>2453</td><td>650</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1,300</td><td>2501</td><td>650</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502</td><td>470</td><td>2502</td><td>235</td><td>Design issue fee</td><td></td></tr> <tr><td>1503</td><td>630</td><td>2503</td><td>315</td><td>Plant issue fee</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>1809</td><td>750</td><td>2809</td><td>375</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>750</td><td>2810</td><td>375</td><td>For each additional invention to be examined (37CFR 1.129(b))</td><td></td></tr> <tr><td>1801</td><td>750</td><td>2801</td><td>375</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> </tbody> </table> |                |              |      | Large Entity  |                | Small Entity |          | Fee Description    | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1051               | 130    | 2051               | 65  | Surcharge - late filing fee or oath |     | 1052              | 50 | 2052 | 25  | Surcharge - late provisional filing fee or cover sheet. |     | 1053             | 130 | 1053            | 130      | Non-English specification |          | 1812               | 2,520    | 1812 | 2,520 | For filing a request for <i>ex parte</i> reexamination |    | 1804                   | 920* | 1804                | 920* | Requesting publication of SIR prior to Examiner action |    | 1805                              | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action |     | 1251                                  | 110 | 2251 | 55 | Extension for reply within first month |    | 1252   | 410 | 2252 | 205 | Extension for reply within second month |   | 1253   | 930 | 2253                | 465 | Extension for reply within third month |  | 1254 | 1,450 | 2254 | 725 | Extension for reply within fourth month |  | 1255 | 1,970 | 2255 | 985 | Extension for reply within fifth month |  | 1401 | 320 | 2401 | 160 | Notice of Appeal |  | 1402 | 320 | 2402 | 160 | Filing a brief in support of an appeal |  | 1403 | 280 | 2403 | 140 | Request for oral hearing |  | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding |  | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable |  | 1453 | 1,300 | 2453 | 650 | Petition to revive - unintentional |  | 1501 | 1,300 | 2501 | 650 | Utility issue fee (or reissue) |  | 1502 | 470 | 2502 | 235 | Design issue fee |  | 1503 | 630 | 2503 | 315 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) |  | 1809 | 750 | 2809 | 375 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 1810 | 750 | 2810 | 375 | For each additional invention to be examined (37CFR 1.129(b)) |  | 1801 | 750 | 2801 | 375 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  |
| Large Entity  |          | Small Entity |          |   |                |              |      | Fee Description   | Fee Paid       |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$) | Fee Code     | Fee (\$) |   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1051  | 130      | 2051         | 65       |   |                |              |      | Surcharge - late filing fee or oath                     |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1052  | 50       | 2052         | 25       |   |                |              |      | Surcharge - late provisional filing fee or cover sheet. |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1053  | 130      | 1053         | 130      | Non-English specification   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1812  | 2,520    | 1812         | 2,520    | For filing a request for <i>ex parte</i> reexamination  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1804  | 920*     | 1804         | 920*     | Requesting publication of SIR prior to Examiner action  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1805  | 1,840*   | 1805         | 1,840*   | Requesting publication of SIR after Examiner action   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1251  | 110      | 2251         | 55       | Extension for reply within first month  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1252  | 410      | 2252         | 205      | Extension for reply within second month   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1253  | 930      | 2253         | 465      | Extension for reply within third month  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1254  | 1,450    | 2254         | 725      | Extension for reply within fourth month   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1255  | 1,970    | 2255         | 985      | Extension for reply within fifth month  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1401  | 320      | 2401         | 160      | Notice of Appeal  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1402  | 320      | 2402         | 160      | Filing a brief in support of an appeal  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1403  | 280      | 2403         | 140      | Request for oral hearing  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1451  | 1,510    | 1451         | 1,510    | Petition to institute a public use proceeding   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1452  | 110      | 2452         | 55       | Petition to revive - unavoidable  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1453  | 1,300    | 2453         | 650      | Petition to revive - unintentional  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1501  | 1,300    | 2501         | 650      | Utility issue fee (or reissue)  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1502  | 470      | 2502         | 235      | Design issue fee  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1503  | 630      | 2503         | 315      | Plant issue fee   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1460  | 130      | 1460         | 130      | Petitions to the Commissioner   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1807  | 50       | 1807         | 50       | Processing fee under 37 CFR 1.17(q)   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1806  | 180      | 1806         | 180      | Submission of Information Disclosure Stmt   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 8021  | 40       | 8021         | 40       | Recording each patent assignment per property (times number of properties)  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1809  | 750      | 2809         | 375      | Filing a submission after final rejection (37 CFR 1.129(a))   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1810  | 750      | 2810         | 375      | For each additional invention to be examined (37CFR 1.129(b))   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1801  | 750      | 2801         | 375      | Request for Continued Examination (RCE)   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1802  | 900      | 1802         | 900      | Request for expedited examination of a design application   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <input type="checkbox"/> Deposit Account<br>Deposit Account Number: 13-2855<br>Deposit Account Name: MARSHALL, GERSTEIN & BORUN   |          |              |          |   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| The Director is hereby authorized to: (check all that apply)<br><input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.  |          |              |          |   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>1. BASIC FILING FEE</b><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1001</td><td>750</td><td>2001</td><td>375</td><td>Utility filing fee</td><td>750.00</td></tr> <tr><td>1002</td><td>330</td><td>2002</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>520</td><td>2003</td><td>260</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>750</td><td>2004</td><td>375</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td>(\$)</td> <td>750.00</td> </tr> </tbody> </table>   |          |              |          | Large Entity  |                | Small Entity |      | Fee Description   | Fee Paid       | Fee Code     | Fee (\$) | Fee Code           | Fee (\$) | 1001     | 750      | 2001     | 375      | Utility filing fee | 750.00 | 1002               | 330 | 2002                                | 165 | Design filing fee |    | 1003 | 520 | 2003  | 260 | Plant filing fee |     | 1004            | 750      | 2004                      | 375      | Reissue filing fee |          | 1005 | 160   | 2005   | 80 | Provisional filing fee |      | <b>SUBTOTAL (1)</b> |      |  |    | (\$)                              | 750.00 |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |          | Small Entity |          | Fee Description   | Fee Paid       |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$) | Fee Code     | Fee (\$) |   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1001  | 750      | 2001         | 375      | Utility filing fee  | 750.00         |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1002  | 330      | 2002         | 165      | Design filing fee   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1003  | 520      | 2003         | 260      | Plant filing fee  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1004  | 750      | 2004         | 375      | Reissue filing fee  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1005  | 160      | 2005         | 80       | Provisional filing fee  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>SUBTOTAL (1)</b>   |          |              |          | (\$)  | 750.00         |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <tr> <td>Total Claims</td> <td>6</td> <td>-20** =</td> <td></td> <td>x</td> <td>Fee from below</td> <td>=</td> <td>0.00</td> </tr> <tr> <td>Independent Claims</td> <td>1</td> <td>-3** =</td> <td></td> <td>x</td> <td></td> <td>=</td> <td>0.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>=</td> <td></td> </tr> </table><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td>(\$)</td> <td>0.00</td> </tr> </tbody> </table> <p style="font-size: x-small;">**or number previously paid, if greater; For Reissues, see above</p> |          |              |          | Total Claims  | 6              | -20** =      |      | x   | Fee from below | =            | 0.00     | Independent Claims | 1        | -3** =   |          | x        |          | =                  | 0.00   | Multiple Dependent |     |                                     |     |                   |    | =    |     | Large Entity  |     | Small Entity     |     | Fee Description | Fee Paid | Fee Code                  | Fee (\$) | Fee Code           | Fee (\$) | 1202 | 18    | 2202   | 9  | Claims in excess of 20 |      | 1201                | 84   | 2201   | 42 | Independent claims in excess of 3 |        | 1203 | 280    | 2203  | 140 | Multiple dependent claim, if not paid |     | 1204 | 84 | 2204                                   | 42 | ** Reissue independent claims over original patent |     | 1205 | 18  | 2205                                    | 9 | ** Reissue claims in excess of 20 and over original patent |     | <b>SUBTOTAL (2)</b> |     |  |  | (\$) | 0.00  |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Total Claims  | 6        | -20** =      |          | x   | Fee from below | =            | 0.00 |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Independent Claims  | 1        | -3** =       |          | x   |                | =            | 0.00 |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Multiple Dependent  |          |              |          |   |                | =            |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |          | Small Entity |          | Fee Description   | Fee Paid       |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$) | Fee Code     | Fee (\$) |   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1202  | 18       | 2202         | 9        | Claims in excess of 20  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1201  | 84       | 2201         | 42       | Independent claims in excess of 3   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1203  | 280      | 2203         | 140      | Multiple dependent claim, if not paid   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1204  | 84       | 2204         | 42       | ** Reissue independent claims over original patent  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1205  | 18       | 2205         | 9        | ** Reissue claims in excess of 20 and over original patent  |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>SUBTOTAL (2)</b>   |          |              |          | (\$)  | 0.00           |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Other fee (specify) _____   |          |              |          |   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| *Reduced by Basic Filing Fee Paid <b>SUBTOTAL (3)</b> (\$ ) 0.00  |          |              |          |   |                |              |      |   |                |              |          |                    |          |          |          |          |          |                    |        |                    |     |                                     |     |                   |    |      |     |   |     |                  |     |                 |          |                           |          |                    |          |      |       |  |    |                        |      |                     |      |  |    |                                   |        |      |        |   |     |                                       |     |      |    |  |    |  |     |      |     |   |   |  |     |                     |     |  |  |      |       |      |     |   |  |      |       |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |

|                     |                        |                                   |                |
|---------------------|------------------------|-----------------------------------|----------------|
| <b>SUBMITTED BY</b> |                        | Complete (if applicable)          |                |
| Name (Print/Type)   | Mark H. Hopkins, Ph.D. | Registration No. (Attorney/Agent) | 44,775         |
| Signature           |                        | Telephone                         | (312) 474-6633 |
|                     |                        | Date                              | July 10, 2003  |

|  |                                  |
|--|----------------------------------|
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Richard Zimmermann  
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Application Data Sheet